

A Critique of “Five-Tone Healing in the Narrow Sense” Based on Ancient Chinese Medical Texts

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Abstract

[Objective] To define and critique the “narrow sense of five-tone healing” in contemporary discourse and practice: namely, the orientation that primarily relies on the “five tones-five viscera” correspondence, intervenes through fixed repertoires or labeled methods, and staticizes or inductively simplifies the ancient medical-musical tradition. On this basis, according to ancient Chinese medical and related classics, this study aims to restore the theoretical levels of the ancient medical-musical healing tradition and reveal the connotations obscured by the aforementioned orientation.

[Methods] Utilizing a synthesis of philological genetic analysis and sonodynamic perspectives, this study systematically reviews the institutional accounts in classical texts regarding the subdivision of the five tones, the twelve pitches (six yang-pitch-pipes and six yin-pitch-pipes), the seven sounds, and the theory of *Xuangong Zhuandiao* (key rotation). Combined with an analysis of the “skeleton notation” characteristics of ancient scores, the significance of acoustic elements such as ornamentation and vocal embellishment (*Runqiang*) at the performance level is discussed. Furthermore, starting from the difference between simple integer ratio tuning systems and the twelve-tone equal temperament, the theoretical implications under ancient and modern acoustic-resonance contexts are compared.

[Results] The ancient medical classics do not present a single framework that can be simplified into “five viscera matched with five melodies” : texts such as *Lingshu* (The Divine Pivot) record the subdivision of the five tones into various tonal patterns linked to the regulation of meridians; the six gallbladder/viscera correspond to the six yang-pitch-pipes and the twelve meridians; and texts like *Liji* (The Book of Rites) and *Suishu* (The Book of Sui) record modal theories such as *Xuangong* and the eighty-four modes. Regarding tuning systems, simple integer ratio relationships predominate, which differ essentially in physical

structure from the twelve-tone equal temperament. These contents are often omitted or flattened in the narrative of “narrow five-tone healing.”

[Limitations] This paper focuses on literature review and theoretical-acoustic analysis, lacking empirical data from large-sample clinical acoustic interventions; the institutional connection between ancient musical systems and modern diagnostic and treatment scenarios remains to be deepened in subsequent research.

[Conclusion] Ancient Chinese medical-musical healing should be understood as a relatively precise and dynamic tradition of *Qi*-transformation rhythm tuning; “narrow five-tone healing” tends to cause a historical obscuration of the classical tradition during dissemination and practice. Future efforts should reconstruct theoretical and practical expressions that connect with tradition and avoid re-simplification, through the mutual verification of philological restoration and acoustic principles.

Full Text

Preamble

A Critique of “Narrow Five-Tone Healing” Based on Ancient Chinese Medical Texts

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Introduction

The concept of “Five-Tone Healing” (五音疗愈) has gained significant traction in contemporary wellness and therapeutic circles, often tracing its theoretical lineage back to the *Huangdi Neijing* (Yellow Emperor’s Inner Canon). However, a rigorous examination of ancient Chinese medical texts reveals a discrepancy between modern interpretations—which often adopt a “narrow” view of music therapy—and the holistic, complex systems described in classical literature. This paper provides a critical analysis of the “narrow” definition of Five-Tone Healing, arguing that modern applications frequently oversimplify the relationship between sound, the human body, and the cosmological framework of traditional Chinese medicine (TCM).

The Theoretical Foundation of the Five Tones

In ancient Chinese thought, the Five Tones—*Gong* (宫), *Shang* (商), *Jue* (角), *Zhi* (徵), and *Yu* (羽)—are not merely musical notes but are symbolic representations of the Five Elements (Wood, Fire, Earth, Metal, and Water). According to the *Lingshu* (Miraculous Pivot) section of the *Huangdi Neijing*, these tones correspond to the five Zang-organs: the Liver (*Jue*), Heart (*Zhi*), Spleen (*Gong*), Lungs (*Shang*), and Kidneys (*Yu*).

The “narrow” view of Five-Tone Healing typically operates on a simplistic one-to-one correspondence: listening to *Gong* music strengthens the Spleen, while *Shang* music treats Lung ailments. While this provides a convenient framework for clinical application, it often ignores the dynamic interactions of the “Generating” (生) and “Overcoming” (克) cycles that define TCM pathology.

A Critique of the Narrow Interpretation

The primary critique of narrow Five-Tone Healing lies in its reductionist approach. Ancient texts emphasize that the human body is a microcosm of the universe, where “sound” is an expression of *Qi* (energy).

1. **The Neglect of Individual Constitution:** Narrow applications often prescribe standardized “Five-Tone playlists” without considering the patient’s unique constitutional balance. In classical medicine, the same symptom in two different individuals might require entirely different tonal interventions based on their *Yin-Yang

摘要

Defining and Critiquing the “Narrow Sense of Five-Tone Healing” in Contemporary Discourse and Practice

In contemporary discourse and practice, “Five-Tone Healing” is often defined in a narrow sense, characterized by an approach that relies primarily on the correspondence between the “Five Tones and the Five Zang-organs.” This orientation tends to utilize fixed repertoires or labeled intervention methods, effectively staticizing and over-simplifying the ancient tradition of medical music into a set of inductive formulas. This narrow interpretation reduces a complex, dynamic system of healing to a rigid mapping of musical notes to physiological functions.

Building upon this critique, this study draws on ancient Chinese medical texts and related classical literature to reconstruct the theoretical layers of the traditional medical-music healing system. By doing so, we aim to reveal the profound connotations of this tradition that have been obscured by the aforementioned reductive approaches.

The Limitations of the Narrow Approach

The prevailing “narrow sense of Five-Tone Healing” often operates on a superficial level of symbolic correspondence. By assigning specific musical scales (Gong, Shang, Jue, Zhi, and Yu) to specific internal organs (Spleen, Lung, Liver, Heart, and Kidney) in a one-to-one fashion, contemporary practices frequently overlook the holistic and idiosyncratic nature of traditional Chinese medicine. This labeling approach—where a specific track is prescribed for a specific ailment—ignores the vital role of the patient’s individual constitution, the temporal

context of treatment, and the fluid nature of *Qi* circulation. Such a static reductionism fails to capture the essence of ancient “medical music” (*yi-yue*), which was never intended to be a standardized pharmacological substitute but rather a sophisticated tool for harmonizing the human microcosm with the macrocosm.

Restoring the Theoretical Layers of Ancient Medical Music

To move beyond these contemporary limitations, it is essential to return to the foundational texts of Chinese medicine, such as the *Huangdi Neijing* (Yellow Emperor’s Inner Canon). These records suggest that the ancient tradition of healing through music was structured across multiple theoretical dimensions:

1. **The Cosmological Dimension:** Music was understood as a manifestation of the laws of the universe. The Five Tones were not merely acoustic phenomena but representations of the movement of the Five Elements (*Wu Xing*) and the fluctuations of *Yin* and *Yang*.
2. **The Physiological and Energetic Dimension:** Healing occurred through resonance (*ganying*). The

方法

By integrating the methodologies of philological genetics and sonodynamics, this study systematically reviews the institutional accounts found in classical texts regarding the subdivision of the five tones (*wuyin*), the twelve pitches (*shierlü*), the seven-note scale, and the theory of key rotation (*xuangong zhuandiao*). Combined with an analysis of the “skeleton notation” characteristics of ancient musical scores, we discuss the acoustic significance of performance-level elements such as melodic ornamentation and vocal embellishment (*runqiang*). Furthermore, by examining the discrepancies between temperament systems based on simple integer ratios and the equal temperament system, this paper compares their theoretical implications within the context of ancient and modern acoustic resonance.

The framework presented in ancient medical classics cannot be simplified into a reductive “five internal organs matching five melodies” model. For instance, the *Lingshu Jing* (Divine Pivot) records that the five tones are subdivided into various melodic patterns associated with the regulation of meridians; the six gallbladder/viscera organs correspond to the six yang pitches and the twelve primary meridians; and texts such as the *Liji* (Book of Rites) and *Suishu* (Book of Sui) document sophisticated modal theories, including key rotation and the eighty-four modes. Regarding temperament, these systems primarily rely on simple integer ratios, which differ fundamentally in physical structure from the twelve-tone equal temperament. Such complexities are often omitted or flattened in the narrative of “narrowly defined five-tone healing.” This paper focuses on literature review and theoretical acoustic analysis and lacks empirical data from large-sample clinical acoustic interventions. The institutional integration of ancient musical systems with modern diagnostic and therapeutic scenarios

remains to be further explored in subsequent research.

结论

Traditional medical music therapy should be understood as a relatively precise and dynamic tradition of “Qi-transformation” (qì huà) rhythmic attunement. In contemporary dissemination and practice, “narrowly defined five-tone healing” (wǔ yīn liáo yù) tends to create a historical obscuration of classical traditions. Future research should focus on reconstructing theoretical and practical frameworks that reconnect with tradition while avoiding oversimplification. This reconstruction must be grounded in the mutual verification of philological restoration and acoustic principles.

关键词

Traditional Chinese Medicine and Music Therapy: A Critique of Narrowly Conceived Five-Tone Healing

Abstract

Traditional Chinese Medicine (TCM) has a long history of utilizing music for therapeutic purposes, a practice often referred to as “treating disease with medicine and music” (医乐疗疾). In recent years, the concept of “Five-Tone Healing” (五音疗愈) has gained significant attention. However, much of the contemporary discourse and application of this practice remains “narrowly conceived,” often reducing the complex relationship between music and human physiology to a simplistic mapping of five notes to five internal organs. This article critiques the limitations of this narrow interpretation by revisiting ancient Chinese medical classics and the foundational theories of Chinese musicology, including the Five Tones (五音), the Six Pitch-pipes (六律), the Seven Sounds (七声), and the overall temperament system (律制). By examining these foundational elements, we aim to provide a more comprehensive understanding of how music functions as a therapeutic modality within the TCM framework.

Introduction

The integration of music into medical practice is deeply rooted in Chinese cultural heritage. The etymological relationship between the characters for “music” (乐, *yuè*) and “medicine” (药, *yào*) suggests an intrinsic link recognized since antiquity. In the context of Traditional Chinese Medicine, music is not merely an aesthetic experience but a functional tool for regulating the flow of *Qi*, balancing *Yin* and *Yang*, and harmonizing the emotional states associated with the *Zang-fu* organs. Despite this rich theoretical foundation, modern interpretations of “Five-Tone Healing” frequently suffer from reductionism, failing to account for the sophisticated acoustic and cosmological systems that define traditional Chinese musicology.

The Theoretical Foundations of Chinese Musicology

To understand the therapeutic potential of music in TCM, one must first grasp the structural components of the traditional tonal system.

The Five Tones (五音) and Seven Sounds (七声) The Five Tones—*Gong* (宫), *Shang* (商), *Jue* (角), *Zhi* (徵), and *Yu* (羽)—form the core of the pentatonic scale. In the narrow interpretation of music therapy, these are often mapped directly to the Spleen, Lungs, Liver, Heart, and Kidneys, respectively. However, ancient texts emphasize that these tones do not exist in isolation. The expansion into the ”

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Abstract

[Objective] paper defines critiques narrowly conceived five-tone healing practices discourse chiefly tones viscera mapping, fixed repertoires, tag-like interventions, thereby flattening classical medical-music traditions static induction. basis, re-reads ancient Chinese medical related classics restore layered rationale medical music healing expose narrowing obscures. [Methods] Historical philology combined acoustodynamic perspective. study systematically reviews classical accounts subdivided tones, twelve classical pitch standards pitch classes, seven degrees, modulation; analyzes skeletal score feature traditional notation; discusses ornamentation vocal nuance acoustic dimensions; compares simple-integer-ratio temperament twelve-tone equal temperament physical-acoustic terms. [Results] Classical medicine reducible viscera tunes grid: texts Lingshu record multiple patterns channel therapy; align pitch standards twelve meridians; Suishu document modulation eighty-four theory; temperament rests primarily simple integer ratios, structurally distinct twelve-tone equal temperament.

These layers often omitted flattened narrowly conceived five- healing narratives. [Limitations] chiefly documentary theoretical acoustic; large-sample clinical acoustic evidence lacking, institutional links between ancient pitch systems modern clinical settings further research. [Conclusions] Ancient Chinese medical music healing better understood relatively refined, dynamic qi-rhythm tuning tradition.

Narrowly conceived five-tone healing historically obscure classical record; future should rebuild theory practice through mutual corroboration textual restoration acoustic principles, reconnecting tradition while avoiding renewed reduction.

Keywords

Introduction

Music therapy as an academic discipline emerged in China during the 1980s, establishing a theoretical paradigm centered on the *Huangdi Neijing* (The Yellow

Emperor's Inner Canon). However, this paradigm has gradually fallen into the pitfalls of static induction, simplifying the complex ancient system of medical music into mechanical 1 : 1 correspondences. Pan Hejing conducted a bibliometric analysis of five-tone therapy randomized controlled trials and found that only 63.95% of the studies reported specific melodies. Lyu Peng et al. pointed out that there is a dearth of research regarding the underlying mechanisms of five-tone therapy; most existing studies rely on Western music therapy mechanisms and lack in-depth interpretation of characteristic Traditional Chinese Medicine (TCM) theories. Gao Yetao argued that the *Huangdi Neijing* provides very few theoretical discussions on the "Five Tones," and its technical systems have been lost for a millennium. Consequently, modern research often focuses solely on the five tones while neglecting the deeper technical frameworks. This paper presents an argument across four dimensions, aiming to restore the academic essence of ancient medical music as a precise and dynamic system.

1 古代医典中的六律与七音制度

The *Wuyin Wuwei* (Five Tones and Five Flavors) section of the *Huangdi Neijing* further subdivides the five primary tones into twenty-five distinct types, with each tonal variant corresponding to specific meridian points for clinical modulation. The *Zhi* tone is divided into *Youzhi*, *Shaozhi*, *Zhizhi*, *Shangzhi*, and *Panzhi*; the *Jue* tone into *Youjue*, *Dijue*, *Shangjue*, *Taijue*, and *Panjue*; the *Shang* tone into *Youshang*, *Shaoshang*, *Dishang*, *Shangshang*, and *Zuoshang*; the *Gong* tone into *Shaogong*, *Shanggong*, *Taigong*, *Jiagong*, and *Youjuegong*; and the *Yu* tone into *Zhongyu*, *Zhiyu*, *Shangyu*, *Taiyu*, and *Shaoyu*. This sophisticated classification demonstrates that the ancient medico-musical system was far more complex than a simple one-to-one correspondence between the five tones and the five *zang* organs; rather, it established a multi-layered system of physiological and pathological correlations.

The *Jingbie* (Meridian Divergences) chapter records: "The Yellow Emperor asked Qi Bo: 'I have heard that man corresponds to the Way of Heaven. Internally, there are five *zang* organs to correspond with the five tones, five colors, five seasons, five flavors, and five positions. Externally, there are six *fu* organs to correspond with the *Liulü* (Six Pitch-pipes). The *Liulü* establish the Yin and Yang meridians, aligning them with the twelve months, twelve double-hours, twelve solar terms, twelve earthly rivers, twelve periods, and the twelve regular meridians. This is how the five *zang* and six *fu* organs correspond to the Way of Heaven.' "

This passage clearly distinguishes between two systems: the internal five *zang* organs corresponding to the five tones, and the external six *fu* organs corresponding to the *Liulü*. The specific names of the *Liulü* and *Liu Lü* (collectively the Twelve Standard Pitches) are: six Yang pitches (*Huangzhong*, *Taicu*, *Guxi*, *Ruibin*, *Yize*, *Wushe*) and six Yin pitches (*Dalu*, *Jiazhong*, *Zhonglü*, *Linzhong*, *Nanlü*, *Yingzhong*). This theory establishes a systematic correspondence between the six *fu* organs and the meridians, reflecting a chronomedical perspec-

tive centered on the “unity of humanity and heaven.”

The *Liyun* (Transmission of Rites) states: “The five tones, the six pitch-pipes, and the twelve tubes revolve to serve as the *Gong* (tonic) for one another.” This describes the classical theory of “revolving the *Gong* to create modes.” According to the “Treatise on Music” in the *Book of Sui*, during the Kaihuang era of the Sui Dynasty, Zheng Yi derived eighty-four modes based on the theories of the Kucha musician Sujiva:

“Each pitch-pipe has seven tones, and each tone establishes a mode, thus forming seven modes. The twelve pitch-pipes combined yield eighty-four modes; they revolve and intersect, all reaching perfect harmony” [?]. Traditional Chinese music, while rooted in the pentatonic scale, incorporates “pianyin” (extra-pentatonic tones) to form hexatonic and heptatonic scales. The terminology for these tones appears in ancient musical treatises:

“*Qing* refers to a pitch one semitone higher; *Bian* refers to a pitch one semitone lower.” A hexatonic scale is formed by adding *Qingjue* (high fourth) or *Biangong* (low tonic) to the pentatonic base. *Qingjue* is the sharpened version of *Jue*, meaning it is one pitch higher; *Biangong* is the altered version of *Gong*, meaning it is one pitch lower. Hexatonic modes incorporating *Qingjue* enrich the lower support of the scale, while those incorporating *Biangong* strengthen the upper melodic structure. Heptatonic scales add two such tones, forming three primary types: the *Qingle* scale (adding *Qingjue* and *Biangong*), the *Yanle* scale (adding *Qingjue* and *Run*), and the *Yayue* scale (adding *Bianzhi* and *Biangong*). These four extra-pentatonic tones each possess distinct characteristics:

Qingjue is the sharpened *Jue* (one pitch higher), *Bianzhi* is the altered *Zhi* (one pitch lower), *Biangong* is the altered *Gong* (one pitch lower), and *Run* is the sharpened *Yu* (two pitches lower). Since each of the five primary tones (*Gong*, *Shang*, *Jue*, *Zhi*, *Yu*) can serve as the tonic, the three types of heptatonic scales produce a total of fifteen heptatonic modes (five modes per scale). The complexity of the heptatonic scales and the eighty-four modes proves that ancient music theory possessed a rich and sophisticated modal system.

Sun Simiao’ s *Beiji Qianjin Yaofang* (Essential Formulas Worth a Thousand Gold Pieces for Emergencies) records the “Six-Qi Vocalization Method.” The section on “Breath Regulation Method No. 5” states: “For cold-type heart disease, the breath should be exhaled as *Hu*; for heat-type disease, it should be blown out as *Chui*; for lung disease, it should be exhaled as *Xu*; for liver disease, as *He*; for spleen disease, as *Xi*; and for kidney disease, as *Si*” [?]. The correspondence between the Six Qi (*Hu*, *Chui*, *Xu*, *He*, *Xi*, *Si*) and the five *zang* organs represents a specific application of “sound-breath” therapy in Traditional Chinese Medicine. In the Ming Dynasty, Zhang Jingyue’s *Leijing Fuyi* (Supplement to the Classified Canon) systematically discussed the relationship between musical pitches and medicine: “The pitch-pipes represent the righteous Qi of Heaven and Earth, and the central sounds of humanity” [?].

2 骨架谱特性与加花润腔的声学意义

Traditional Chinese notation systems are characterized by recording only the fundamental framework of the music rather than its complete morphological form. For instance, *Jianzipu* (reduced-stroke notation) is a specialized notation for the *guqin*, documenting elements such as right-hand fingering symbols, string order, left-hand fingering symbols, and fret positions (*hui*). Similarly, *Gongchepu* utilizes Chinese characters—such as *he*, *si*, *yi*, *shang*, *chi*, *gong*, *fan*, *liu*, *wu*, and *yi*—to denote pitch. However, these notations remain skeletal; actual performance requires artistic embellishments such as *runqiang* (vocal/melodic lubrication) and *jiahua* (adding flowers/ornamentation) based on oral traditions. As Wang Jide noted in the chapter “On Melodic Tunes” of his Ming Dynasty treatise *Qu Lü*:

“The framework of music lies in the composition, but its luster lies in the singing.” [?] This refers to the musical technique of introducing melodic variations during the extended vocal passages (*tuqiang*), enriching the melody through decorative techniques such as *souqiang* and *huoqiang*. In the context of traditional vocal performance, this process involves the comprehensive mobilization of technical means—including timbre, melody, dynamics, articulation, rhythm, and phonetics—to polish and modify the melodic lines. Ding Yaxian categorizes *runqiang* techniques into seven types: connected phrasing, detached phrasing, ornamentation, timbre variation, dynamic variation, tempo variation, and microtonal pitch fluctuation. The acoustic significance of *runqiang* lies in its physical effects: appoggiaturas provide rapid pitch changes that stimulate the auditory nerves; glissandi achieve continuous pitch transitions for smooth progression; and vibrato produces periodic pitch fluctuations that enhance resonance. These acoustic elements, which are essential to the music’s identity, cannot be captured by written notation and have been significantly overlooked in modern research.

3 古代律制与现代十二平均律的本质差异

The Sanfen Sunyi (Three-part Addition and Subtraction) system was first recorded in the *Guanzi: Diyuan*: “To establish the five tones, first take one and triple it; repeat this four times to reach eighty-one, which serves as the basis for the Huangzhong tone, forming the Gong. Add one-third to this to obtain one hundred and eight, which forms the Zhi” [?]. The core operations are: “subtracting one-third” (reducing string length by 1/3) to find the upper fifth, and “adding one-third” (increasing string length by 1/3) to find the lower fourth.

After generating twelve tones using the Sanfen Sunyi method, a discrepancy of approximately 23.46 cents exists between the “Qing” Huangzhong and the original Huangzhong octave, preventing a perfect return to the octave. The Twelve-Tone Equal Temperament, invented by Zhu Zaiyu during the Ming Dynasty, divides the octave into twelve equal parts according to a geometric pro-

gression. While this system features equal semitones and facilitates modulation, its perfect fifth is approximately 2 cents lower than that of Just Intonation, thereby losing the advantage of natural resonance. Physical acoustic research indicates that the frequencies in Just Intonation consist of simple integer ratios, which more easily produce harmonic superposition and formant enhancement. The simple integer frequency relationships of the temperament system naturally align with the principles of physical resonance, making it easier to form harmonic resonance with the inherent frequencies of human internal organs.

The “Monograph on Rhythms and the Calendar” (*Lülizhi*) records the method of “Houqi” (observing the ethers): “The method of Houqi involves constructing a triple-walled room with sealed doors and plastered crevices...The ends of the pitch pipes are filled with reed ash. According to the calendar, when the specific ‘Qi’ arrives, the ash is blown out” [?]. The physical principles revealed by the Houqi method are twofold: the length of the pitch pipe corresponds to a specific resonant frequency, and specific pipes resonate when changes in the “earthly Qi” occur. This demonstrates that ancient rhythmic healing (*Lülü Liaoji*) was established upon a holistic worldview of “resonance between heaven and humanity.”

4 音区与八音材质的气机调控机制

The system of *qing* (clear/high) and *zhuo* (turbid/low) in ancient music serves as a core concept for representing pitch registers rather than simple octave relationships. In this framework, *qing* denotes the high register, *zhuo* denotes the low register, and *zhong* (middle) represents the reference register. These registers can span multiple octaves, functioning as a relative conceptual division of the musical range. The vibration characteristics of the “Eight Tones” (*bayin*)—metal, stone, silk, bamboo, gourd, earth, leather, and wood—vary significantly according to their material properties. According to the *Zhou Li* (Rites of Zhou), the Grand Master was responsible for “mastering the six *lü* and six *tong* to harmonize the sounds of Yin and Yang...all of which are disseminated through the eight tones: metal, stone, earth, leather, silk, wood, gourd, and bamboo” [29]. Regarding the “metal” category (bronze bells), data from the Hubei Provincial Museum indicates that the Marquis Yi of Zeng bells possess a range spanning five and a half octaves and feature a unique dual-tone structure. The design of the flat (almond-shaped) bell utilizes the *xian* (lateral edges) to constrain acoustic vibration and accelerate decay, allowing it to function as a melodic instrument. In contrast, round bells produce excessive reverberation; as noted in historical texts, “striking them rapidly results in a blurred resonance where *qing* and *zhuo* can no longer be distinguished” [31]. Modern psychoacoustic research demonstrates that different frequency ranges and timbres exert differentiated effects on human physiological indicators.

Jakitsch found that while both high-frequency and low-frequency auditory stimuli can significantly reduce heart rate, the level of heart-brain coupling during high-frequency stimulation is significantly lower than that observed during low-

frequency stimulation.

Analysis by Zhang reveals that musical intervention can increase parasympathetic nervous activity, with the most effective strategies involving slow tempos and low-frequency sounds. These modern studies provide a scientific foundation for understanding the medical significance of the *qing-zhuo* system in antiquity.

5 对现代

The Theory of Five-Tone Reductionism

Modern research on Five-Tone Therapy has reduced the theories of the *Huangdi Neijing* (The Yellow Emperor's Inner Canon) into a static formula. *Suwen* (Basic Questions) explicitly states: "The five viscera correspond to the tones, which can be perceived and understood" [?]. This indicates that the correspondence between the five internal organs and the five tones is a cognitive and technical system. Current methodological limitations are evident: sample sizes are generally small, there is a lack of multi-center, large-sample randomized controlled trials, and the level of evidence-based medical support remains low. Furthermore, there is a significant absence of interdisciplinary research, particularly regarding the deep involvement of musicological expertise. This reductionism has led to serious consequences: it simplifies complex ancient theories into mechanical correspondences, ignoring the dynamic and holistic nature of Traditional Chinese Medicine (TCM) theory. It excludes vital theoretical components—such as the *Liulü Liulü* (twelve-tone temperament system), seven-tone modes, and *Xuangong Zhuandiao* (key modulation)—from the scope of research. Moreover, it overlooks critical acoustic elements such as skeletal score characteristics, melodic ornamentation (*Jiahua Runqiang*), differences in temperament systems, register variations, and the vibrational properties of different materials.

6 结论

This study systematically demonstrates the rich connotations of the ancient Chinese medical-musical therapeutic system. Records in the *Lingshu* (Miraculous Pivot) subdivide the five pentatonic tones into twenty-five distinct sound patterns, while the correspondence between the twelve pitch-pipes (*Shier Lü*) and the six *fu* organs and twelve meridians reveals the deep structural framework of pentatonic theory. Furthermore, the theories of *Xuangong Zhuandiao* (key-rotation and modulation) and the eighty-four modes documented in the *Liji* (Book of Rites) and *Suishu* (Book of Sui) illustrate the dynamic variability of modal spaces.

This suggests that the nuances of actual musical performance constitute a vital component of acoustic intervention. Ancient temperament systems utilized simple integer frequency ratios, which differ fundamentally from the modern twelve-tone equal temperament; these ratios are more conducive to forming harmonic resonance with the natural frequencies of the internal organs. The three

registers (clear, medium, and turbid) and the material properties of the eight categories of instruments (*Bayin*) form the physical foundation for regulating the movement of *Qi*.

It is worth emphasizing that this paper does not negate the value of existing practices, but rather argues that pentatonic therapy should not be rigidly confined to the five tones themselves. The richness of the ancient medical-musical system provides vast developmental space for pentatonic therapy: expanding from the five tones to the twelve pitch-pipes and heptatonic modes; moving from static correspondences to the dynamic regulation of key-rotation; transitioning from notes on paper to the acoustic details of melodic ornamentation (*Jiahua Runqiang*); exploring the resonance effects of ancient temperaments compared to single tuning systems; and extending from abstract pitch to the physical regulation of registers and materials. Future research should: enrich the modal selection of pentatonic therapy within the theoretical frameworks of the twelve pitch-pipes, heptatonic modes, and key-rotation; emphasize the acoustic significance of skeletal scores and melodic ornamentation; explore the integration of ancient temperaments with modern medicine; and achieve individualized precision treatment at the levels of register and material.

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Note: Figure translations are in progress. See original paper for figures.

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